

## **Application Data Sheet**

### **Application Information**

Application number::

Filing Date:: Herewith

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: PAPER-BASED INTERFACE FOR MULTIMEDIA  
INFORMATION

Attorney Docket Number:: 015358-006500US

Request for Early Publication:: No

Request for Non-Publication:: Yes

Suggested Drawing Figure:: 7A

Total Drawing Sheets:: 34

Small Entity?:: No

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.: No

10001391551001

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Jonathan  
Middle Name:: J.  
Family Name:: Hull  
Name Suffix::  
City of Residence:: San Carlos  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 751 Laurel Street PMB 434  
City of Mailing Address:: San Carlos  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94070

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Jamey  
Middle Name::  
Family Name:: Graham  
Name Suffix::  
City of Residence:: San Jose  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 1196 Shasta Avenue  
City of Mailing Address:: San Jose  
State or Province of mailing address:: CA

## Correspondence Information

Correspondence Customer Number:: 20350

### Representative Information

Representative Customer Number:: 20350

### Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation-in-part of	09/149,921	09/09/98

## Foreign Priority Information

Country:: Application number:: Filing Date::

### Assignee Information

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::